ELECTRONIC INFORMATION DISCLOSURE STATEMENT

Electronic Version v18
Stylesheet Version v18.0

Title of Invention

System and Method for Controlling Communication Between a Host Computer and Communication Devices Associated with Remote Devices in an Automated Monitoring System

Application Number: 09/925786

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First Named Applicant: James Davis
Attorney Docket Number: STAT1150

Art Unit: 2152

Examiner: Nabil M El Hady

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or 6411889 or 6415245 or 6422464 or 6424270 or 6424931 or 6430268 or 6431439 or 6437692 or 6438575 or 6445291 or 6456960 or 6457038 or 64362672 or 6475589 or 6483290 or 6484939 or 6489884 or 6489290 or 6482930 or 6484939 or 6489380 or 6493920 or 6436369 or 6504794 or 6506724 or 6518680 or 6538577 or 6542076 or 6542077 or 6543690

or 6560223 or 6574603 or 6600726 or 6608551 or 6618578 or 6618709 or 6628965 or 6653945 or 6671586 or 6674403 or 6678255 or 6678285 or 6731201 or 6735630

or 6747557).pn

US Patent Documents

Note: Applicant is not required to submit a paper copy of cited US Patent Documents

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Remarks

Note: Remarks are not for responding to an office action.

This Information Disclosure Statement is being filed with a Request for Continued Examination ("RCE") under 37 C.F.R. 1.114. The RCE documents and fee will be filed in paper format soon after the submission of this Information Disclosure Statement. In accordance with Rule 114, this Information Disclosure Statement will be the required submission. This Information Disclosure Statement Submission contains both electronically filed and paper filed Information Disclosure Statements. There will be ten (10) electronic information disclosure statements filed in this

submission, and this electronic submission is the ninth of ten (9 of 10). The paper filed submission will contain foreign references (non-USPTO references) and other non-patent literature documents. All later filed partial submissions (electronic and paper) will reference this same information. Again, the RCE fee will be submitted along with the submitted RCE papers.

Signature

| Examiner Name | Date |
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